



State of Ohio Environmental Protection Agency

P.O. Box 1049, 1800 WaterMark Dr.
Columbus, Ohio 43266-0149
(614) 644-3020
FAX (614) 644-2329

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MAY 14 1993

George V. Voinovich
Governor

Donald R. Schregardus
Director

April 14, 1993

Uniroyal Chemical Company Inc.
Attn: R. Kenney
720 Fairport Nursery Road
Painesville, OH 44077

RE: EPA ID#: OHD004214078

LOCATION of INSTALLATION: 720 Fairport Nursery Rd
Painesville, OH 44077

In response to your request of March 1993 the following information has been updated:

Name: Uniroyal Chemical Co Inc
(formerly listed as Uniroyal Chemical Inc)

If you have any questions, please contact Beth Barrett at (614)644-2977.

Sincerely,

Thomas E. Crepeau

Thomas E. Crepeau, Manager
Data Management Section
Division of Hazardous Waste Management

TEC/bab

cc: U.S. EPA, Region V
Ohio EPA District Office



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UNITED STATES
ENVIRONMENTAL PROTECTION AGENCY
REGION V

111 West Jackson Blvd.
CHICAGO, ILLINOIS 60604

REPLY TO ATTENTION OF:
RCRA ACTIVITIES

APR 22 1992

Mr. R. W. Kenney, Env. Engr.
Uniroyal Chemical Company
P. O. Box 460
Painesville, OH 44077

RE: Interim Status Acknowledgement
FACILITY NAME: Uniroyal Chemical Co.

USEPA ID No. OHD004214078

Dear Mr. Kenney:


This is to acknowledge that the U.S. Environmental Protection Agency (USEPA) has completed processing your Part A Hazardous Waste Permit Application. It is the opinion of this office that the information submitted is complete and that you, as an owner or operator of a hazardous waste management facility, have met the requirements of Section 3005(e) of the Resource Conservation and Recovery Act (RCRA) for Interim Status. However, should USEPA obtain information which indicates that your application was incomplete or inaccurate, you may be requested to provide further documentation of your claim for Interim Status. Our opinion will be reevaluated on the basis of this information.

As an owner or operator of a hazardous waste management facility, you are required to comply with the interim status standards as prescribed in 40 CFR Parts 122 and 265, or with State rules and regulations in those States which have been authorized under Section 3006 of RCRA. In addition, you are reminded that operating under interim status does not relieve you from the need to comply with all applicable State and local requirements.

The printout enclosed with this letter identifies the limit(s) of the process design capacities your facility may use during the interim status period. This information was obtained from your Part A Permit application. If you wish to handle new wastes, to change processes, to increase the design capacity of existing processes, or to change ownership or operational control of the facility, you may do so only as provided in 40 CFR Sections 122.22 and 122.23.

As stated in the first paragraph of this letter, you have met the requirements of 40 CFR Part 122.23; your facility may operate under interim status until such time as a permit is issued or denied. This will be preceded by a request from this office or the State (if authorized) for Part B of your application. Please contact Arthur Kawatachi of my staff at (312) 886-7449, if you have any questions concerning this letter or the enclosure.

Sincerely yours,


Karl J. Klepitsch, Jr., Chief
Waste Management Branch

Handwritten note:
4-20-82

Enclosure

cc: Robert J. Mazaika, Dir. of Mfg. & Engr.

FACILITY NAME

UNIROYAL CHEMICAL

EPA ID NUMBER

OHD004214078

FACILITY OPERATOR

UNIROYAL CHEMICAL CO DIV OF UNIROYAL INC

FACILITY OWNER

UNIROYAL CHEMICAL CO DIV OF UNIROYAL INC

FACILITY LOCATION

720 FAIRPORT NURSERY ROAD
PAINESVILLE OH 44077

PROCESS CODE *****	DESIGN CAPACITY *****	UNIT OF MEASURE *****
S01	30000.00000	G

*****KEY*****

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE	* UNIT OF MEASURE	CODE
STORAGE:			* GALLONS	G
*****			* LITERS	L
CONTAINER	S01	G OR L	* CUBIC YARDS	Y
TANK	S02	G OR L	* CUBIC METERS	C
WASTE PILE	S03	Y OR C	* GALLONS PER DAY	U
SURFACE IMPOUNDMENT	S04	G OR L	* LITERS PER DAY	V
DISPOSAL:			* TONS PER HOUR	D
*****			* METRIC TONS\HOUR	W
INJECTION WELL	D79	G,L,U, OR V	* GALLONS\HOUR	E
LANDFILL	D80	A OR F	* LITERS\HOUR	H
LAND APPLICATION	D81	B OR G	* ACRE-FEET	A
OCEAN DISPOSAL	D82	U OR V	* HECTARE-METER	F
SURFACE IMPOUNDMENT	D83	G OR L	* ACRES	B
TREATMENT:			* HECTARES	Q
*****			* POUNDS\HOUR	J
TANK	T01	U OR V	* KILOGRAMS\HOUR	R
SURFACE IMPOUNDMENT	T02	U OR V	* TONS PER DAY	N
INCINERATOR	T03	D,E,E, OR H	* METRIC TONS\DAY	S
OTHER	T04	J,R,N,S,U,V	*	



**ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)**

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

• OHD004214078

REACKNOWLEDGEMENT

UNIROYAL CHEMICAL
PO BOX 460
PAINESVILLE

OH 44077

INSTALLATION ADDRESS

720 FAIRPORT NURSERY ROAD
PAINESVILLE

OH 44077

S	W	CHAD	421	4078	21
1	2	3	4	5	6

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1 F 0 0 1 23 - 26	2 F 0 0 3 23 - 26	3 23 - 26	4 23 - 26	5 23 - 26	6 23 - 26
7 23 - 26	8 23 - 26	9 23 - 26	10 23 - 26	11 23 - 26	12 23 - 26

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13 23 - 26	14 23 - 26	15 23 - 26	16 23 - 26	17 23 - 26	18 23 - 26
19 23 - 26	20 23 - 26	21 23 - 26	22 23 - 26	23 23 - 26	24 23 - 26
25 23 - 26	26 23 - 26	27 23 - 26	28 23 - 26	29 23 - 26	30 23 - 26

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31 U 0 0 9 23 - 26	32 U 0 9 2 23 - 26	33 U 2 2 3 23 - 26	34 23 - 26	35 23 - 26	36 23 - 26
37 23 - 26	38 23 - 26	39 23 - 26	40 23 - 26	41 23 - 26	42 23 - 26
43 23 - 26	44 23 - 26	45 23 - 26	46 23 - 26	47 23 - 26	48 23 - 26

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49 23 - 26	50 23 - 26	51 23 - 26	52 23 - 26	53 23 - 26	54 23 - 26
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E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☒ 1. IGNITABLE
(D001)

☒ 2. CORROSIVE
(D002)

☒ 3. REACTIVE
(D003)

☒ 4. TOXIC
(D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE

NAME & OFFICIAL TITLE (type or print)

DATE SIGNED

ROBERT M. HALL
FACTORY MANAGER

8/11/80



UNIROYAL

UNIROYAL CHEMICAL

Division of UNIROYAL, Inc.
Painesville, Ohio 44077

216-357-7574

March, 17, 1986

RCRA Activities
Region V
P.O. Box A3587
Attention: ATKJG
Chicago, IL 60690

Gentlemen:

Enclosed is the Certification Regarding Potential Releases from Solid Waste Management Units for the Painesville Plant requested in your letter of January 31, 1986.



R.W. Kenney

RWK/cer

Enc.

CERTIFICATION REGARDING POTENTIAL RELEASES FROM
SOLID WASTE MANAGEMENT UNITS

FACILITY NAME: Uniroval Chemical Company, Inc. *dsd 750*
 EPA I.D. NUMBER: OHD004214078
 LOCATION CITY: Painesville *only*
 STATE: Ohio

1. Are there any of the following solid waste management units (existing or closed) at your facility? NOTE - DO NOT INCLUDE HAZARDOUS WASTE UNITS CURRENTLY SHOWN IN YOUR PART A APPLICATION

	<u>YES</u>	<u>NO</u>
• Landfill	<u>X</u>	<u> </u>
• Surface Impoundment	<u>X</u>	<u> </u>
• Land Farm	<u> </u>	<u>X</u>
• Waste Pile	<u> </u>	<u>X</u>
• Incinerator	<u> </u>	<u>X</u>
• Storage Tank (Above Ground)	<u> </u>	<u>X</u>
• Storage Tank (Underground)	<u> </u>	<u>X</u>
• Container Storage Area	<u> </u>	<u>X</u>
• Injection Wells	<u> </u>	<u>X</u>
• Wastewater Treatment Units	<u>X</u>	<u> </u>
• Transfer Stations	<u> </u>	<u>X</u>
• Waste Recycling Operations	<u> </u>	<u>X</u>
• Waste Treatment, Detoxification	<u>X</u>	<u> </u>
• Other <u> </u>	<u> </u>	<u> </u>

2. If there are "Yes" answers to any of the items in Number 1 above, please provide a description of the wastes that were stored, treated or disposed of in each unit. In particular, please focus on whether or not the wastes would be considered as hazardous wastes or hazardous constituents under RCRA. Also include any available data on quantities or volume of wastes disposed of and the dates of disposal. Please also provide a description of each unit and include capacity, dimensions and location at facility. Provide a site plan if available.

See Att. A

NOTE: Hazardous wastes are those identified in 40 CFR 261. Hazardous constituents are those listed in Appendix VIII of 40 CFR Part 261.

3. For the units noted in Number 1 above and also those hazardous waste units in your Part A application, please describe for each unit any data available on any prior or current releases of hazardous wastes or constituents to the environment that may have occurred in the past or may still be occurring.

Please provide the following information

- a. Date of release
- b. Type of waste released
- c. Quantity or volume of waste released
- d. Describe nature of release (i.e., spill, overflow, ruptured pipe or tank, etc.)

Unknown

4. In regard to the prior or continuing releases described in Number 3 above, please provide (for each unit) any analytical data that may be available which would describe the nature and extent of environmental contamination that exists as a result of such releases. Please focus on concentrations of hazardous wastes or constituents present in contaminated soil or groundwater.

See Att. A

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the submittal is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. (42 U.S.C. 6902 et seq. and 40 CFR 270.11(d))

J. L. Gatto, Factory Manager

Typed Name and Title


Signature

3/14/86
Date

2. Landfill - A number of locations in the plant were used for disposal of plant material. Materials in the sites are scrap PVC resin, compounded PVC and ABS scrap, mixed trash, refuse, paper, spent HgCl_2 catalyst on activated carbon, distillation highboilers from vinyl chloride monomer purification, fly ash, scrap nitrile rubber and potassium hydroxide. Landfilling ended in 1976.

Surface Impoundments

- a. An abandoned wastewater treatment sludge settling lagoon contains PVC scrap, nitrile rubber scrap and distillation highboilers from vinyl chloride monomer purification. May contain acrylonitrile as a hazardous constituent.
- b. An abandoned and covered lagoon contains scrap PVC, mixed trash, refuse, paper, fly ash, scrap nitrile rubber and sludge from the equalization and sludge lagoons in the waste water treatment plant. May contain acrylonitrile as a hazardous constituent in the wastewater sludges.

Wastewater Treatment Units

Wastewater sludges are collected in an equalization lagoon and sludge lagoon. May contain acrylonitrile as a hazardous constituent.

Waste Treatment, Detoxification

Dilute acrylonitrile generated in a process is neutralized with sodium bisulfite prior to discharge to the waste treatment plant.

4. The surface water and groundwater runoff from the fill sites containing the fly ash, PVC, plant trash, distillation highboilers and HgCl_2 was tested for Hg. The water contained <0.2 ppb Hg. There doesn't appear to be any continuing releases of Hg from the fill areas.



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 5

230 SOUTH DEARBORN ST.

CHICAGO, ILLINOIS 60604

REPLY TO THE ATTENTION OF:

5HS-13

15 APR 1988

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

R. Kenney
Environmental Engineer
Uniroyal Chemical, Incorporated
Post Office Box 460
Painesville, Ohio 44077

RE: Part B Call-in
Uniroyal Chemical, Incorporated
720 Fairport Nursery Road
Painesville, OH 44077
OHD 004214078

Dear Mr. Kenney:

Some time ago, you should have received an acknowledgement of the United States Environmental Protection Agency's (U.S. EPA) receipt of your Part A permit application material for the above-referenced hazardous waste facility under the Resource Conservation and Recovery Act (RCRA) permit program. Accordingly, your facility is currently authorized with interim status under Section 3005(e) of RCRA. This letter constitutes the next step in the formal process leading toward issuance or denial of a RCRA permit. Under the authority of 40 CFR §270.10, this is a formal request for submittal of Part B of the permit application for the above-referenced facility. The Part B application is due six months from the date you receive this letter.

Enclosed is a copy of 40 CFR Part 270 which lists the items required for submitting the Part B permit application for your facility. A copy of the "Part B Completeness Checklist" is enclosed to help you in preparing a comprehensive and complete permit application.

If your facility chooses not to pursue a full RCRA permit, you may withdraw your intent to seek a permit by filing a closure plan with the U.S. EPA and Ohio Environmental Protection Agency (OEPA). Federal RCRA closure regulations (40 CFR Subpart G) require that you submit a closure plan to: George Hamper (5HS-13), Chief, Ohio Section, U.S. EPA - Region V, 230 South Dearborn Street, Chicago, Illinois 60604. Approval by both Agencies is necessary prior to commencement of any activities that are part of the closure plan.

Some facilities may be unable to comply with the financial responsibility requirements for liability coverage under 40 CFR §264.147. If your facility is unable to meet these requirements, or any other applicable requirements of 40 CFR Parts 270 or 264, then we must deny the permit for your facility. In that case, you would probably want to submit a closure plan under 40 CFR Subpart G rather than the completed Part B application.

If your facility never actually treated, stored, or disposed of hazardous waste under RCRA, then it may not be necessary to submit either a Part B application or a closure plan. However, you will have to submit a Part A withdrawal request for review. This request must demonstrate that your facility never actually qualified for interim status because either: 1) the waste was not a hazardous waste as defined in 40 CFR §261; 2) that there has been no treatment, storage, or disposal of the waste since November 19, 1980; or 3) that the hazardous waste management process was exempt from the permitting requirements of RCRA. For example, storage of waste generated on-site in containers or tanks less than 90 days is exempt from the permitting requirements of RCRA in accordance with 40 CFR §262.34. Likewise, treatment in a wastewater tank is exempt under 40 CFR §270.1(c)(2)(u). A withdrawal request requirements contained in 40 CFR §270.11.

The Agency is committed to conducting the RCRA ly as possible. Consequently, you may want to my staff, at (312) 353-4734, to discuss any qu regarding the preparation of the application. discuss specific needs of your application or efforts are intended to generate complete appl information beyond that which is necessary to

Should you have any questions about confidential to the enclosed rules on confidentiality as set 40 CFR §270.12 of RCRA. If you anticipate asse please review the above-referenced enclosure re dentiality (§2.208) that sets forth the criteri confidentiality.

5HSJCK-13 238

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(See Reverse)

Sent to	R. Kenney
Street and No.	POB 460
P.O. State and ZIP Code	Painesville, OH 44077
Postage	318
Certified Fee	85
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	90
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$4.93
Postmark or Date	

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

Print PS Form 3800, June 1985

RETI

860712700040

Please be reminded that submission of the Part B application must be made six months from the receipt date (i.e., date this letter is received). Upon completion of the application, please send two copies to the U.S. EPA and three copies to the OEPA. Please number each page of the application uniquely, including all attachments (maps, specifications, etc.). A certification statement identical to the one stated in 40 CFR §270.11(d) must accompany each application and all additional submittals. Send two copies of the application to the following address:

RCRA ACTIVITIES
Part B Permit Application
U.S. EPA, Region V
Post Office Box A-3587
Chicago, Illinois 60690-3587

Send three copies to: Thomas Crepeau
Ohio Environmental Protection Agency
Division of Solid & Hazardous Waste Management
Post Office Box 1049
Columbus, Ohio 43266-1049

Failure to furnish the complete Part B permit application by the above date, and to provide in full all required information, is grounds for termination of interim status under 40 CFR §270.10. In addition, failure to answer this request may also result in subsequent enforcement action by the U.S. EPA.

Upon receiving the Part B application, the U.S. EPA will coordinate its review with the OEPA and will strive for the simultaneous issuance of Federal and State hazardous waste facility permits. It is possible that during the processing of the application, the State hazardous waste program may become authorized to issue RCRA permits for your type of facility. In that case, direct Federal processing will cease, and OEPA, in lieu of U.S. EPA, will make the final determination on your permit application.

A copy of 40 CFR Part 264 is enclosed to help you in addressing the requirements and standards for the operation of treatment, storage and disposal facilities. These standards will become applicable to your facility upon issuance of a RCRA permit by U.S. EPA. A copy of the July 14, 1986, hazardous waste tank system regulatory amendments is also enclosed. These new rules establish technical standards and operating procedures for the owners and operators of tank systems that use tanks for accumulating, storing or treating hazardous waste. These rules may be applicable to your facility and are, therefore, enclosed for your information.

On November 8, 1984, the Hazardous and Solid Waste Amendments of 1984 (HSWA) were signed into law. This new law amends RCRA and contains many provisions which may affect your facility. Under the corrective action requirements of HSWA, your facility is required to correct all releases of hazardous waste or constituents from any solid waste management unit, regardless of the time at which waste was placed in the unit. Please note that the corrective action requirements apply to all solid waste management units, not just the hazardous waste management units subject to the permitting requirements. Enclosed is a document entitled "Certification Regarding Potential Releases from Solid Waste Management Units." It is necessary for you to complete and submit this form with your Part B application to help address corrective action requirements. If you previously completed and submitted this form, and if the information is accurate and up-to-date, you may simply include a copy of your previous submittal in your Part B application.

This Agency looks forward to working with you toward fulfilling the above request. Again, should you have any questions concerning the above matter, please contact us for assistance.

Sincerely,



William E. Muno
Acting Associate Division Director
Office of RCRA

Enclosures: 40 CFR Part 270 (applicable parts)
Part B Completeness Checklist
40 CFR Part 2 (applicable parts)
40 CFR Part 264 (applicable parts)
Certification Regarding Potential Releases
from Solid Waste Management Units

cc: Paul Flanigan, OEPA
District Office Manager, OEPA
Ed Lim, OEPA

HEADER INFORMATION - PERMIT/CLOSURE TRACKING

NEW ENTRY ONLY

FACILITY NAME Uniroyal Chemical, Inc. FACILITY I.D. # OH0004214078

HEADER TYPE: (Circle one)
(C2001)

HEADER PROCESS TYPE: (Circle one)
(C2003)

☒ P = permit, includes FMP process
M = permit modification
W = post-closure permit
R = research & development
C = closure (for LDF-clean closure only)
L = post-closure activities

☒ S = storage, treatment
I = incineration
D = disposal

HEADER PROCESS INDICATOR: (Circle one)
(C2051)

☒ R = requested (Call-in)
S = submitted
C = covered (permit issued or closure plan approved)

Date covered (C2004)

* PROCESS CODE
(C2052)

* PROCESS AMT.
(C2053)

* PROCESS UNITS
(C2054)

SO1

30000.00

G

* See key on reverse side.

o ACTION EVENT (CODE)	RESP. AGENCY	RESP. PERSON	DUE DATE	ACTUAL DATE	o STATUS CODE
<u>01</u>	<u>E</u>	<u>ALB</u>		<u>4/15/88</u>	
<u>02</u>	<u>E</u>	<u>ALB</u>	<u>10-18-88</u>		

o See appropriate portion of Permit Issuance Tracking document for applicable codes.

Revised 2/3/88

4/22/88
GB



State of Ohio Environmental Protection Agency

P.O. Box 1049, 1800 WaterMark Dr.
Columbus, Ohio 43266-0149



Richard F. Celeste
Governor

April 28, 1988

RE: OHIO PART B CALL-IN
US EPA ID NO.: OH0004214078
OHIO PERMIT NO.: 02-43-0503

CERTIFIED MAIL

Mr. R.W. Kenney
Environmental Engineer
Uniroyal, Inc.
P.O. Box 460
Painesville, OH 44077

Dear Mr. Kenney:

The purpose of this letter is to formally request the submittal of Part B of your Ohio hazardous waste permit application according to the requirements of Rule 3745-50-40(A)(2) of the Ohio Administrative Code.

Although you may have already submitted a Part B application to the US EPA, that application was for your federal RCRA permit. According to Ohio regulations, a Part B application must be reviewed by the Ohio EPA as part of the renewal process for your Ohio hazardous waste permit application.

Ohio regulations provide up to six months for submittal of the Part B permit application, you are requested to submit the Part B within six months of the date of this letter in order to expedite the review of your application and the issuance of a final determination of the Director or of the Hazardous Waste Facility Board, as appropriate. Please submit two copies of the Part B as follows:

Ohio EPA
Division of Solid and Hazardous Waste Management
Program Planning and Management Section
1800 WaterMark Drive
P.O. Box 1049
Columbus, Ohio 43266-0149

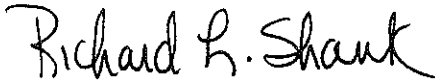
If you have submitted a Part B application to Ohio and US EPA under federal requirements and you do not wish to provide additional information, Ohio EPA will use the Part B that is on file for review. Please inform this office if the file copy is to be used. However, all applicants are required to submit a completed checklist as explained in the following paragraph.

Ohio Part B Call-In
Page Two

Attached you will find a checklist of information to be included in a Part B application which cross-references 40 CFR 270 and 264 regulations with Rules 3745-50 to 3475-69 of the Ohio Administrative Code. Please complete this checklist stating precisely on which page(s), figure(s), etc. of your application each applicable Ohio rule has been addressed. If a rule is not applicable to your facility, please so indicate on the checklist.

If you have questions regarding the contents of this letter, or need additional guidance, please contact either Ed Lim, (614) 481-7239, or Thomas F. Crepeau, (614) 481-7217, of the Division of Solid and Hazardous Waste Management.

Sincerely,

A handwritten signature in black ink that reads "Richard L. Shank". The signature is written in a cursive, flowing style.

Richard L. Shank, Ph.D.
Director

RLS/RR/ep
2122R/46-47

Attachment

cc: NEDO

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

UNIROYAL

OHD 004 214 078.

UNIROYAL CHEMICAL
Division of UNIROYAL, Inc.
Painesville, Ohio 44077
216-357-7574

November 16, 1981

Mr. Paul Lewandowski
United States EPA
Region V
RCRA Activities
P.O. Box A 3587
Chicago, Illinois 60680

Dear Mr. Lewandowski:

Attached is a copy of a letter dated July 30, 1981, which was sent to the Ohio EPA to revise our RCRA permit application. This confirms the information I gave to you by telephone on November 16, 1981.

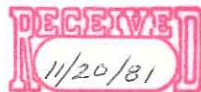
Very truly yours,

Raymond W. Kenney

Raymond W. Kenney
Energy & Environmental Engineer
UNIROYAL Chemical
Division of UNIROYAL, Inc.

RWK:hew

Att. (1)



RECEIVED
NOV 20 1981
WASTE MANAGEMENT BRANCH
EPA, REGION V

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

UNIROYAL

UNIROYAL CHEMICAL
Division of UNIROYAL, Inc.
Painesville, Ohio 44077
216-357-7574

July 30, 1981

bcc: RMH DSB
Naugatuck
P. E. Reed
D. R. Kogut
Oxford
R. C. Niles

Ms. Peggy Vince
Permit Coordinator
Ohio EPA
Office of Hazardous Materials Management
361 E. Broad Street
Columbus, OH 43215

Re: UNIROYAL, Inc.
HWFAB ID No. 81 HW 0503

Dear Ms. Vince:

In response to your letter of July 2, 1981, enclosed is our permit application fee of \$500, a more legible copy of an aerial photo of the plant and a photo of our hazardous waste drum storage area.

The following air permits have been issued by the Ohio EPA:

0243000030P032	Proctor and Schwartz Dryer
0243000030P033	Anderson Dryer
0243000030P035	Rotary Dryer - Area 4
0243000030P036	Polymerization Plant - Area 4
0243000030T004	Fuel Oil Storage
0243000030B002	Murray Oil & N.G. Fired Boiler

The following item is on registration:

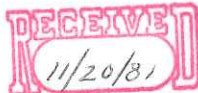
0243000030P034	Flyash Conveyor
----------------	-----------------

An air permit application has been submitted for the following item:

0243000030B003	Erie City Boiler #2
----------------	---------------------

Also enclosed are revised pages 1, 2 and 3 of 5 of Form 3 RCRA. These revisions are made to reflect our present operation and the changes in the regulations since our application was filed with the USEPA in November, 1980. These revisions were reviewed with Mr. Daniel J. Banaszek of the USEPA Region V who was at our plant on July 23, 1981 to conduct a RCRA Compliance Inspection for Interim Status.

If you have any questions regarding the above, please contact me.



Very truly yours,

RW Kennedy

R. W. Kennedy
Energy and Environmental Engineer
UNIROYAL Chemical
Division of UNIROYAL, Inc.

RECEIVED
11/20/01

Continued from the front.

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS.....	P	KILOGRAMS.....	K
TONS.....	T	METRIC TONS.....	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous waste: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD WASTE NO (enter code)				B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES							
	1. PROCESS CODES (enter)						2. PROCESS DESCRIPTION (if a code is not entered in D(1))							
X-1	K	0	5	4	900	P	T	0	3	D	8	0		
X-2	D	0	0	2	400	P	T	0	3	D	8	0		
X-3	D	0	0	1	100	P	T	0	3	D	8	0		
X-4	D	0	0	2									included with above	

NOTE: Photocopy this page before completing. You have more than 26 wastes to list.

EPA I.D. NUMBER (enter from page 1)													FOR OFFICIAL USE ONLY												
W												W													
1 2 3 4 5 6 7 8 9 10 11 12												13 14 15 16 17 18 19 20 21 22 23 24													
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)																									
LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES																					
				1. PROCESS CODES (enter)								2. PROCESS DESCRIPTION (if a code is not entered in D(1))													
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26
1	D001	1060	P	S01																					
2	U223	200	P	S01																					
3	U239	750	P	S01																					
4																									
5																									
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UNIROYAL CHEMICAL
Division of UNIROYAL, Inc.
Elm Street
Naugatuck, Connecticut 06770

November 11, 1980

Mr. James McAvoy
Director
Ohio EPA
361 E. Broad Street
Columbus, Ohio 43216

Dear Mr. McAvoy:

In accordance with EPA's August 6, 1980 policy statement regarding consolidated permits and certification provisions, it has been determined that I have signatory authority on permit applications for UNIROYAL Chemical Company.

This is to notify you that my authorized representative for signing all reports required by such permits and other related information transmitted to you upon your request which are applicable to UNIROYAL Chemical Company, Painesville, Ohio, is its Factory Manager. At this time, the Factory Manager is Mr. Robert M. Hall.

Sincerely yours,

UNIROYAL CHEMICAL COMPANY
Div. of Uniroyal, Inc.

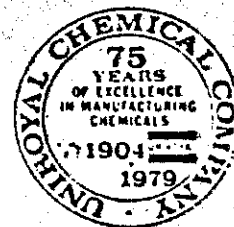
R. J. MAZAIKA, Director
Manufacturing & Engineering

RJM:nds

cc: V. A. Calarco
R. M. Hall
C. S. Exton

R. W. Kenney
J. M. Lines
B. R. Leach

P. E. Reed
I. J. Krakower



CERTIFICATION STATEMENT

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this facility's hazardous waste facility permit application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application. I believe the information is true, accurate and complete. I am aware that these are significant penalties for submitting false information, including the possibility of fine and imprisonment.


Name

FACTORY MANAGER

Title

7/30/81

Date

WHO SHOULD SIGN THE CERTIFICATION STATEMENT?

- A. For a corporation, by a principal executive officer of at least the level of vice president.
- B. For partnership or sole proprietorship, by a general partner or the proprietor, respectively; or
- C. For a municipality, State, Federal, or other public facility, by either a principal executive officer or ranking elected official.

FORM 1		ENVIRONMENTAL PROTECTION AGENCY		EPA I.D. NUMBER	
GENERAL		GENERAL INFORMATION		EPA I.D. NUMBER	
LABEL ITEMS		Consolidated Permits Program		EPA I.D. NUMBER	
(Read the "General Instructions" before starting.)				EPA I.D. NUMBER	
I. EPA I.D. NUMBER		OHD004214078		EPA I.D. NUMBER	
III. FACILITY NAME		UNIROYAL INC		EPA I.D. NUMBER	
V. FACILITY MAILING ADDRESS		PO BOX 460 PAINESVILLE, OH 44077		EPA I.D. NUMBER	
VI. FACILITY LOCATION		FAIRPORT NURSERY ROAD PAINESVILLE, OH 44077		EPA I.D. NUMBER	
II. POLLUTANT CHARACTERISTICS		INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.		GENERAL INSTRUCTIONS	
SPECIFIC QUESTIONS		MARK 'X'		SPECIFIC QUESTIONS	
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		YES NO FORM ATTACHED		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		YES NO FORM ATTACHED		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)		YES NO FORM ATTACHED		F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		YES NO FORM ATTACHED		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		YES NO FORM ATTACHED		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)	
III. NAME OF FACILITY		UNIROYAL, INC.		EPA I.D. NUMBER	
IV. FACILITY CONTACT		A. NAME & TITLE (last, first, & title)		B. PHONE (area code & no.)	
2 KENNEY R W ENVIRONMENTAL ENGR		216 357 7574		EPA I.D. NUMBER	
V. FACILITY MAILING ADDRESS		A. STREET OR P.O. BOX		EPA I.D. NUMBER	
3 PO BOX 460		EPA I.D. NUMBER		EPA I.D. NUMBER	
B. CITY OR TOWN		C. STATE		D. ZIP CODE	
4 PAINESVILLE		OH		44077	
VI. FACILITY LOCATION		A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER		EPA I.D. NUMBER	
5 FAIRPORT NURSERY ROAD		EPA I.D. NUMBER		EPA I.D. NUMBER	
B. COUNTY NAME		C. CITY OR TOWN		D. STATE	
LAKE		6 PAINESVILLE		OH	
E. ZIP CODE		F. COUNTY CODE (if known)		EPA I.D. NUMBER	
44077		085		EPA I.D. NUMBER	

VIII. OPERATOR INFORMATION

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)

E. STREET OR P.O. BOXF. CITY OR TOWN

13	19
X EXISTING ENVIRONMENTAL PERMITS	

15	16	17	18
B. UIC (Underground Injection of Fluids)			

C. RCRA (Hazardous Wastes)

XI. MAP

FQA/50

XII. NATURE OF BUSINESS (provide a brief description)

F9A/5/

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

COMMENTS FOR OFFICIAL USE ONLY

EPA Form 3510-1 (6-80)

FORM 3 RCRA		U.S. ENVIRONMENTAL PROTECTION AGENCY HAZARDOUS WASTE PERMIT APPLICATION Consolidated Permits Program (This information is required under Section 3005 of RCRA.)	I. EPA I.D. NUMBER 04D00421407831
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FOR OFFICIAL USE ONLY		COMMENTS
APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION (place an "X" below and provide the appropriate date)

☒ 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)

☐ 2. NEW FACILITY (Complete item below.)

FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)

YR. MO. DAY
8 5 12 1

FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN

YR. MO. DAY
73 74 75 76 77 78

B. REVISED APPLICATION (place an "X" below and complete item 1 above)

☐ 1. FACILITY HAS INTERIM STATUS

☐ 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES - CODES AND DESIGN CAPACITIES

A. PROCESS CODE - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).

B. PROCESS DESIGN CAPACITY - For each code entered in column A enter the capacity of the process.

1. AMOUNT - Enter the amount.

2. UNIT OF MEASURE - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PRO-CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS	PRO-CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:			Treatment:		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS	TANK	T01	GALLONS PER DAY OR LITERS PER DAY
TANK	S02	GALLONS OR LITERS	SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS	INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS	OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)	T04	GALLONS PER DAY OR LITERS PER DAY
Disposal:					
INJECTION WELL	D79	GALLONS OR LITERS			
LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER			
LAND APPLICATION	D81	ACRES OR HECTARES			
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY			
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS			

UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G	LITERS PER DAY	V	ACRE-FEET	A
LITERS	L	TONS PER HOUR	D	HECTARE-METER	F
CUBIC YARDS	Y	METRIC TONS PER HOUR	W	ACRES	B
CUBIC METERS	C	GALLONS PER HOUR	E	HECTARES	Q
GALLONS PER DAY	U	LITERS PER HOUR	H		

EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

LINE NUMBER	A. PRO-CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY		FOR OFFICIAL USE ONLY	LINE NUMBER	A. PRO-CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY		FOR OFFICIAL USE ONLY
		1. AMOUNT (specify)	2. UNIT OF MEASURE (enter code)				1. AMOUNT	2. UNIT OF MEASURE (enter code)	
X-1	S 0 2	600	G		5				
X-2	T 0 3	20	E		6				
1	S 0 1	30,000,000	G		7				
2	T 0 1 *	2,880,000	U		8				
3					9				
4					10				

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

NOTE*

While UNIROYAL has listed the asterisked element of its wastewater collection system as a "treatment facility" under RCRA regulations language, it does so under protest. This system collects wastewaters for treatment under the Clean Water Act and, except by technical definition (such as high or low pH), are not solid wastes. They should be specifically exempted unless spilled as are products, raw and in-process materials. Otherwise, duplication, confusion, and excessive regulatory intrusion will result.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS.....	P	KILOGRAMS.....	K
TONS.....	T	METRIC TONS.....	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES**1. PROCESS CODES:**

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)				B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES									
	1. PROCESS CODES (enter)						2. PROCESS DESCRIPTION (if a code is not entered in D(1))									
X-1	K	0	5	4	900	P	T	0	3	D	8	0				
X-2	D	0	0	2	400	P	T	0	3	D	8	0				
X-3	D	0	0	1	100	P	T	0	3	D	8	0				
X-4	D	0	0	2												included with above

IV. DESCRIPTION OF HAZARDOUS WASTE

(continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

EPA I.D. NO. (enter from page 1)

S	F	0	H	D	0	0	4	2	1	4	0	7	8	3	6	T/A	C
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

F6A/55

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

F6A/56

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)

LONGITUDE (degrees, minutes, & seconds)

4	1	4	5	2	2	0
65	66	67	68	69	70	71

0	8	1	1	4	2	5	0
72	73	74	75	76	77	78	79

VIII. FACILITY OWNER

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code & no.)

3. STREET OR P.O. BOX												4. CITY OR TOWN												5. ST.				6. ZIP CODE							
F												G																							
13 14 15 16 17 18 19 20 21 22 23 24												25 26 27 28 29 30 31 32 33 34 35 36												37 38 39 40				41 42 43 44 45 46 47 48 49 50 51 52							

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type) Robert J. Mazaika Dir. of Mfg. & Engineering	B. SIGNATURE <i>Robert J. Mazaika</i>	C. DATE SIGNED 11/17/80
--	--	----------------------------

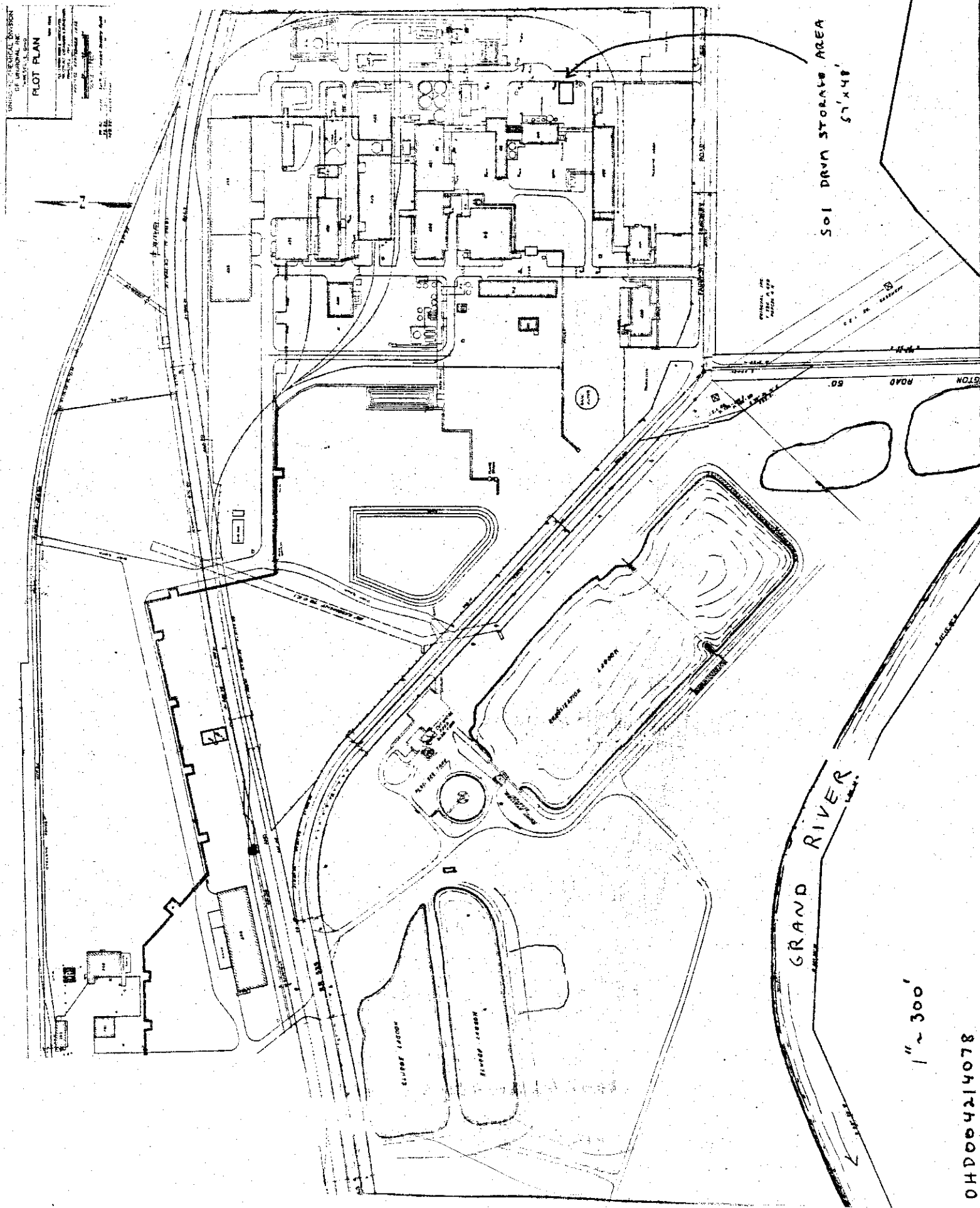
X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

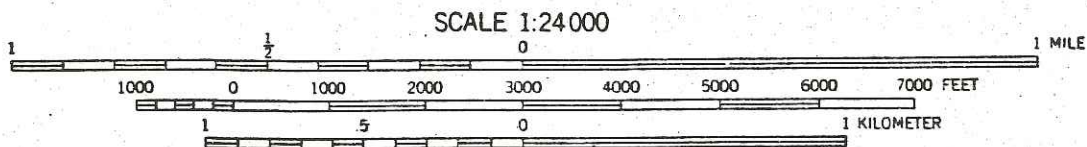
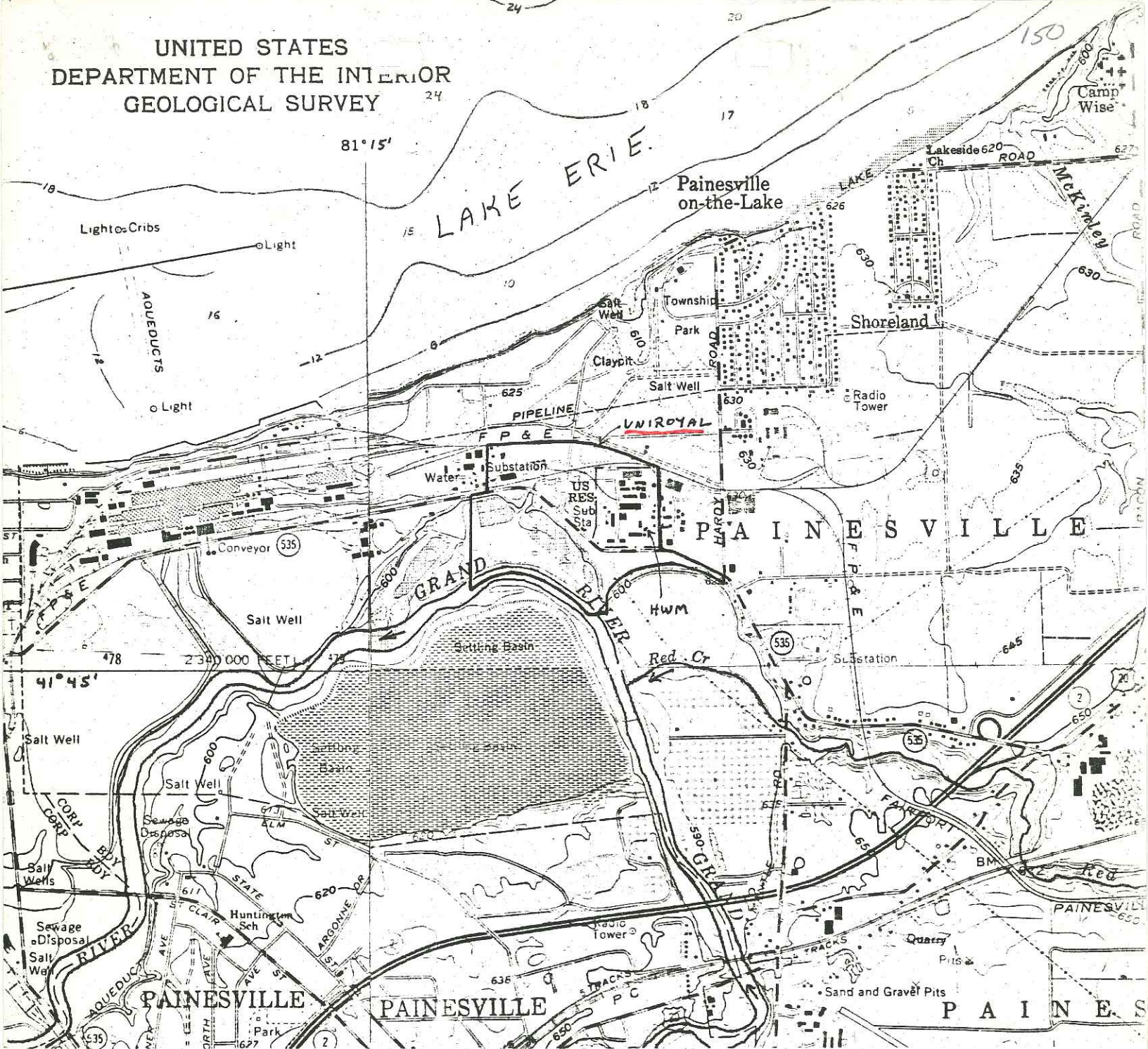
A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED

EPA I.D. NUMBER (enter from page 1)															FOR OFFICIAL USE ONLY																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																
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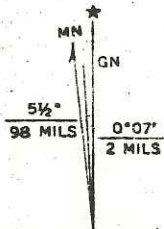
V. FACILITY DRAWING (see page 4)



UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY



CONTOUR INTERVAL 10 FEET
DOTTED LINES REPRESENT 5-FOOT CONTOURS
NATIONAL GEODETIC VERTICAL DATUM OF 1929
DEPTH CURVES AND SOUNDINGS IN FEET—DATUM IS LOW WATER 570.5 FEET



Chemical Division
Painesville, OH 44077

04D004214078

PERRY, OHIO

N4145—W8107.5/7.5

1960
PHOTOREVISED 1979
AMS 4767 I SW—SERIES V852
PAINESVILLE, OHIO
NW/4 CHARDON 15' QUADRANGLE
N4137.5—W8107.5/7.5

1960
PHOTOREVISED 1970
AMS 4767 II NW—SERIES V852
MENTOR, OHIO

N4137.5—W8115/7.5

1963
PHOTOREVISED 1979
AMS 4767 III NE—SERIES V852

UTM GRID AND 1979 MAGNETIC NORTH
DECLINATION AT CENTER OF SHEET



S01 DRUM STORAGE AREA



D002 MATERIAL ENTERING
PROCESS SEWER SYSTEM



D002 MATERIAL ENTERING
PROCESS SEWER SYSTEM

